



Continuous Quality Improvement (CQI)
2015 Initial Assessment Case Record Review Report

APPENDICES

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Appendix A: IA Review Process Methodology, Results, and Discussion

The 2015 Initial Assessment Case Record Review focused on three primary goals and a fourth long-term goal. This appendix provides details on the third goal: testing the new case record review process, including the methodology, the results, and the discussion of those results. The recommendations related to the case record review process are located in the Recommendations section of the full report.

To fully understand the case record review results and the corresponding recommendations, it is important to understand the case record review process. The Initial Assessment review instrument and review process were developed using a multi-step approach. The purpose of this approach was to ensure the review instrument and review procedures designed were able to capture information contained in Initial Assessments with fidelity. Findings from the first year of using the review instrument and following new protocols and procedures were also documented to understand any unintentional biases that may be inherent in the case review results. A full understanding of the process results is also important to identify necessary improvements to the review instrument and process for future reviews.

Methodology

Review Instrument Development

The CPS Initial Assessment case record review instrument was created in collaboration with local child welfare agency staff and researchers at the University of Wisconsin. The review instrument assesses case practice at Initial Assessment as outlined in the Wisconsin Child Protective Services Access and Initial Assessment Standards and the Wisconsin Child Protective Services Safety Intervention Standards (referred to throughout as “Standards”).

An Initial Assessment workgroup comprising staff from the Bureau of Performance Management (BPM), the Bureau of Safety and Well-Being (BSWB), and the Division of Milwaukee Child Protective Services (formerly the Bureau of Milwaukee Child Welfare, or BMCW) was formed in 2014 to develop an Initial Assessment case record review instrument in accordance with Standards, Wisconsin’s Public Child Welfare Practice Model, and Wisconsin’s Child Welfare Safety Model. The intent was to develop an electronic review instrument and corresponding database, such as the one utilized for the 2015 Access case record review (see the [2015 Access Case Record Review Report](#)). However, due to time constraints, the electronic review instrument was not developed prior to the review period commencing. Instead, reviews were completed on paper and were manually entered into an Excel database.

The Initial Assessment workgroup designed the instrument using the same format as the Access review instrument. They also included improvements based on lessons learned from the Access review, such as identifying one construct per question and giving reviewers the opportunity to indicate when there was not enough information to assess IA conclusions (e.g., safety determination, maltreatment determination, and case disposition). The workgroup incorporated feedback from local child welfare agency staff identified by the Wisconsin County Human Services Association (WCHSA) in 2014. Reviewers also conducted inter-rater reliability studies of the Initial Assessment review instrument to assess question reliability and variation among reviewers.

Case Reviewer Training and Review Procedures

The 2015 CPS Initial Assessment case record review was conducted by state reviewers¹ who had prior child welfare case review experience and completed an eight-hour in-person training that introduced the review instrument, process, and protocols.

Reviewers were randomly assigned cases from the sample and were not allowed to review Initial Assessments that could pose a conflict of interest, such as previous assignment to the case or personal relationship with any of the case participants. Reviewers completed the case record review using only data in the eWiSACWIS system, and did not have access to the paper file nor did they conduct interviews with case workers or supervisors as part of the case record review. When protective plans were discussed in the electronic case file, but were not included, requests were made to counties for copies of the protective plans. If during the course of the review a reviewer found a child to be in present danger, a referral was made to the Bureau of Safety and Well-Being (BSWB) to immediately follow up with the county in question.

Quality Management Plan

A detailed quality management (QM) plan was followed to ensure that information collected through the case record review was consistent. The QM plan aims to guide the case review process, clarify questions about the review instruments, reconcile disagreements that affect case ratings, identify areas for further training and guidance, and track issues that need discussion or resolution. There are two components to quality management:

- **Quality assurance:** policies and procedures that are put in place to prevent potential errors prior to the case record review.
- **Quality control:** established processes used to identify and rectify errors after the case record review is completed.

For more on quality management activities, see Appendix H.

Results

Review Instrument

The Initial Assessment review instrument contained a total of 140 questions. Certain questions were only applicable in certain cases (e.g., if the IA involved a protective plan), so fewer than 140 questions were answered per report reviewed. In addition to 20 general information questions (such as eWiSACWIS case number), the final review instrument also contained the following sections and questions:

1. **Present Danger Assessment and Protective Planning:** 31 questions and 5 comment sections
2. **Information Gathering and Analysis:** 49 questions (for Primary Assessments;² 7 of the 49 were specific to Traditional Response only and 3 were only applicable to Alternative Response)
3. **Safety Assessment/Safety Analysis and Plan:** 18 questions and 4 comment sections

¹ State reviewers were from the Bureau of Performance Management (BPM), the DCF unit with the lead for the case record review process. Additional reviewers were also trained from other units within DCF, including from the Bureau of Safety and Well-Being (BSWB), and Bureau of Regional Operations (BRO), and the Division of Milwaukee Child Protective Services (DMCPS).

² The focus of the 2015 Initial Assessment review was on Primary Initial Assessments (Traditional Response and Alternative Response), and there were no reviews of Secondary and Non-caregiver Initial Assessments. However, the review instrument was also designed to assess Secondary/Non-caregiver IAs. These pertain to reports of maltreatment by individuals outside the family. The CPS role in such cases is to collaborate with and support parents or caregivers in providing protection and services for the child, when necessary. There were 5 additional questions in the Information Gathering and Analysis section specific to Secondary/Non-caregiver IAs.

4. **Family Interaction:** One question in the review instrument was related to face-to-face family interaction, which must occur when children are placed in out-of-home care during the initial assessment process.
5. **Timeframes and Interview Protocol:** Six questions and one comment section
6. **American Indian Heritage:** Four questions relating to Wisconsin Indian Child Welfare Act requirements
7. **Conclusion of Initial Assessment:** 11 questions assessed safety determination, maltreater and maltreatment determinations, case disposition, and required notifications.

One component of the Initial Assessment review instrument is that it provided the opportunity for reviewers to indicate “not enough information” in areas regarding present danger, protective planning, impending danger, safety analysis and planning, safety determination, maltreatment and maltreater determinations, and disposition. This option was included to allow reviewers to select an answer other than “Yes” or “No” when necessary information to determine consistency with Standards for these decisions was missing from the electronic case record. The intent was to improve validity of results around these review questions by not forcing a Yes/No answer when there could be instances where it may be impossible to do so (i.e., there is not enough information to know whether or not the outcome was consistent with Standards). The frequency of “not enough information” answers in the review data was greater than expected.

In a similar vein, comments sections were provided for reviewers to indicate what key pieces of missing information were needed to assess the areas noted above. While reviewers did offer comments where required, there was no established method for standardizing reviewer comments prior to the review. As such, it was difficult to identify meaningful trends based on comments received.

Case Record Reviewers and Review Procedures

Case record reviewers began reviewing cases in April 2015 and completed the review in July 2015. Reviewers indicated that they became proficient at the process after evaluating at least 10 Initial Assessments. Once proficient, it took reviewers 90 minutes on average to complete a review (instead of the anticipated 180 minutes per review). A total of 17 DCF staff members³ conducted Initial Assessment reviews, including four reviewers from BPM and two from BSWB. Additionally, five staff members from BRO and six from DMCPs were also trained to conduct Initial Assessment reviews. The training included an eight-hour in-person meeting where information on the Initial Assessment review instrument was presented and participants completed one Initial Assessment review. After completion of the training and passing an additional test case, BRO and DMCPs reviewers were assigned cases to review, which were then checked for accuracy. Due to the compressed timeframe of the review period, the 12 non-core reviewers conducted a small number of case record reviews (between one and seven each). The five remaining core reviewers completed between 35 and 62 reviews each.

As noted above, one section of the Initial Assessment review instrument was dedicated protective plans. When the case record indicated that there were present danger threats and a protective plan was implemented, the Initial Assessment instrument assessed the quality of the protective plan. There are several types of protective plans that the IA review instrument assessed: Temporary Physical Custody, Voluntary Placement Orders, other court orders, and specific documents also known as Protective Plans (which are three-ply paper forms that are used in the field). There were IAs from 7 counties where a corresponding protective plan document could not be found (either because it did not exist or because a

³ The 17 case reviewers were all internal DCF staff. The four BPM staff plus one BSWB staff member were considered “core” reviewers; the remaining 12 reviewers were considered “non-core” reviewers.

hard copy of the document was not scanned into eWiSACWIS). At the time of the review, it was best practice to scan protective plans into the electronic case record, but it was not a requirement. Requests were made to the counties to scan the protective plans into eWiSACWIS; however, they were not scanned in time to be assessed for this report.

Finally, during the course of the review there was one instance where the reviewer suspected a child to be in present danger. A referral was made to BSWB to immediately follow up with the case county.

Quality Management

Reviewer meetings were established on a regular basis for quality assurance purposes and occurred on nine occasions over the course of the Initial Assessment review. Reviewers and managers attended the check-in meetings, which provided clarification to the Initial Assessment review instrument and instructions, as well as a forum to discuss unique cases, challenges, and findings from the reviews. Those who participated in the check-in meetings were also members of the review panel, composed of expert peer reviewers from BPM and BSWB. As part of the quality control plan, cases where it was determined that the child welfare agency was inconsistent with Standards in one of any of the five main decision areas (present danger, impending danger, safety, substantiation, and disposition) were flagged. In order to confirm these findings, the panel reassessed the Initial Assessment in which the original reviewer identified decisions inconsistent with Standards. There were 12 such cases. Upon secondary review, the panel affirmed the reviewer's finding in 11 out of the 12 cases, and reversed the finding in one case.

Another function of the review panel was to refine the Initial Assessment review instrument and instructions. Over the first several weeks of the review period the instrument and instructions went through a detailed editing and revision process, which concluded on June 10, 2015. Throughout this timeframe, minor revisions were completed, such as adding information to instructions and adding or removing questions. For example, revisions included the addition of a question about case disposition related to *unable to locate source*, removal of duplicative questions, and removing redundant items from the information gathering section. When changes to the instrument were finalized, all Initial Assessments previously reviewed were verified to ensure that reviewers' selections reflected the revisions, and answers were updated as needed. Any major revisions to the instrument identified during check-in meetings were tabled and will be implemented in 2016.

In addition to the review panel, a double-blind review of a sub-sample of Initial Assessments was conducted. The purpose of the double-blind review was to assess the reliability of the questions in the IA review instrument. Prior to the beginning of the review, 10% of cases in the sample (27 cases) were selected for double review and assigned to two reviewers who had no knowledge that another reviewer was assigned to review the same case. Upon the completion of the review, 24 double-blind reviews had been conducted, and double-blind results were randomly selected for data analysis.

The double-blind analysis provided information about the quality and reliability of the review instrument and identified questions that may need clarification in the updated review instrument. Table A-1 shows the results of the double-blind review; the questions below had 10 or more discrepancies. For example, there were 15 Initial Assessments in which the two reviewers rated "Adult AODA Issues" differently. The area with the most discrepancies was information gathering, which speaks to the difficult nature of defining comprehensive documentation for specific items, as well as the need to improve instructions around "some" answers and the need for clarification of expectations set forth by Standards.

**Table A-1. Double-Blind Review Results: Questions with 10 or More Discrepancies.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.**

Section:	Question:	No. of Initial Assessments Where Reviewers' Answers Differed:
Information Gathering – Adult Functioning	Adult AODA Issues	15
Information Gathering – Child Functioning	Effects of Maltreatment on Child Functioning	15
Information Gathering – Adult Functioning	Adult Independence/Home Management	12
Present Danger Assessment	Present Danger at Initial Face-to-face Contact	12
Information Gathering – Adult Functioning	Relevant Information from Past Assessments/ Childhood	11
Information Gathering – Child Functioning	Child Typical Behaviors	11
Information Gathering – Child Functioning	Child Injury or Condition	11
Information Gathering – Child Functioning	Child Independence/Dependence	10
Interview Contacts	Necessary Collaterals	10
Maltreatment	Supporting Documentation for Maltreatment Determinations	10
Discipline	Disciplinary Methods Used	10

Lastly, completing quality management activities—including sample preparation, data cleaning, and reviewer check-in meetings—took approximately 440 hours. This time was mainly dedicated to two required actions. The first was the initial data entry by two temporary employees, requiring approximately 320 hours. The data collection process took more time because the Initial Assessment review was conducted on paper, which required manual data entry into the database. Additional time for quality assurance and quality control was also required to ensure data was entered accurately. The second quality management action included time committed to checking the data for errors and completeness and addressing any errors and gaps in data that were discovered. By utilizing SAS, the time spent on this activity was minimized. (More details on quality management can be found in Appendix H: Quality Management.)

Discussion of Findings

The new CQI case record review process worked efficiently. Using a standardized approach to review Initial Assessments had a number of benefits. This new format and methodology allowed for the review of a large sample that is representative of Wisconsin and more systematic data collection. This, in turn, provided the opportunity for more advanced statistical analysis and robust results.

In addition, the approach of dividing case record reviews between Access, Initial Assessment, and Ongoing Services into distinct periods was beneficial to case reviewers, as it allowed reviewers the opportunity to become more proficient in one program area before moving on to the next. Prior to initiating Initial Assessment reviews, it was expected that each CPS Report would take 180 minutes to complete, but as reviewers conducted more than 10 reviews, the time to complete the review decreased to an average 90 minutes.

Reviewer check-in meetings were beneficial. Reviewers expressed that these meetings provided an important opportunity to discuss difficult cases and gather input from other team members. The consultative process provided clarity and helped reviewers acknowledge the complexity of the cases under review. Information from the check-in meetings was also incorporated into the Initial Assessment review instrument and instructions, as noted previously. However, check-in meetings may be difficult to replicate in future years as the number of trained Initial Assessment reviewers increases, particularly if those new reviewers are located across the state. A CQI SharePoint site was created in the effort to share information among reviewers. Additional ways to gather and share information from check-in meetings (e.g., through PDS training, frequently asked questions, selection of test cases) are also being considered for future reviews.

Quality management is important to ensure that review results are consistent and accurate. As the quality control process moved forward, it was time consuming, but necessary; there were more data sources that required vetting and cross comparison than originally considered, such as cross-checking the Initial Assessment review data with the administrative data sources, confirming that the reviewer instructions were correct, and reaffirming reviewer results where needed.

There were pros and cons of providing reviewers the option to indicate “not enough information” for some questions. The benefit of providing this option was that it did not force reviewers to choose a “Yes” or “No” answer when a lack of critical information made it difficult to do so. Additionally, this format provided opportunity for reviewers to describe what information was missing. It also encouraged reviewers to think critically about the information provided when they assessed areas pertaining to present danger, impending danger, protective planning and safety planning. On the other hand, reviewers may have selected this option instead of determining that a child welfare agency was inconsistent with Standards, especially knowing that indicating the latter would result in further review by a panel, which could have unintentionally biased the results. Reviewers may have marked “not enough information” instead of “no” in order to avoid having their case reviewed by the panel.

Conducting the review on paper was tedious. A paper review required additional time for quality management activities, as the electronic database system was not in place for reviewers to enter their results or to validate completed reviews and ensure that all required questions were answered. Reviewers experienced difficulty in completing reviews of 100 or more questions without the added benefit of an electronic review instrument with built-in logic, such as was used for the Access review. This resulted in unintended consequences, such as reviewers providing comments on sections when not prompted and missing applicable questions. When errors were identified or questions were missed, the paper Initial Assessments were returned to the original reviewer, which was time consuming and inefficient.

More time was needed to train new reviewers, and reviews were more likely to be completed when conducting reviews was the core job function. The time invested supporting non-core reviewers was greater than their case review output, as the IA reviews were not their primary responsibility. There was a tight timeframe in which reviews were to be conducted and the process for certifying reviewers was not fully established when the Initial Assessment review was initiated. Therefore, some non-core reviewers

spent significant time completing training prerequisites and were unable to review a high enough number of cases to become proficient, resulting in reviews being completed less timely by non-BPM staff.

Initial Assessment reviewers can be trained in a more efficient manner. In the future, potential reviewers will have all of the required prerequisites for training completed prior to the beginning of review period. DCF will work with the Wisconsin Child Welfare Professional Development System (PDS) to develop more flexible training modules, some of which may be available through distance learning. Future reviews will also be spread over a longer period of time, which will allow for more coaching of new reviewers.

The lack of standardized methods for documenting protective plans resulted in the inability to assess protective plan quality. Because at the time the review was conducted protective plans were not required to be included in the electronic case file, the reviewers were not always able to access the plans to assess their quality. Requests for copies of protective plans were made to counties for cases in which a protective plan was referenced but not included in the electronic case file. However, none of the protective plans requested were received prior to the end of the review. Until the new policies regarding protective plans are fully implemented, the process of requesting the paper protective plan for upcoming reviews should be refined.

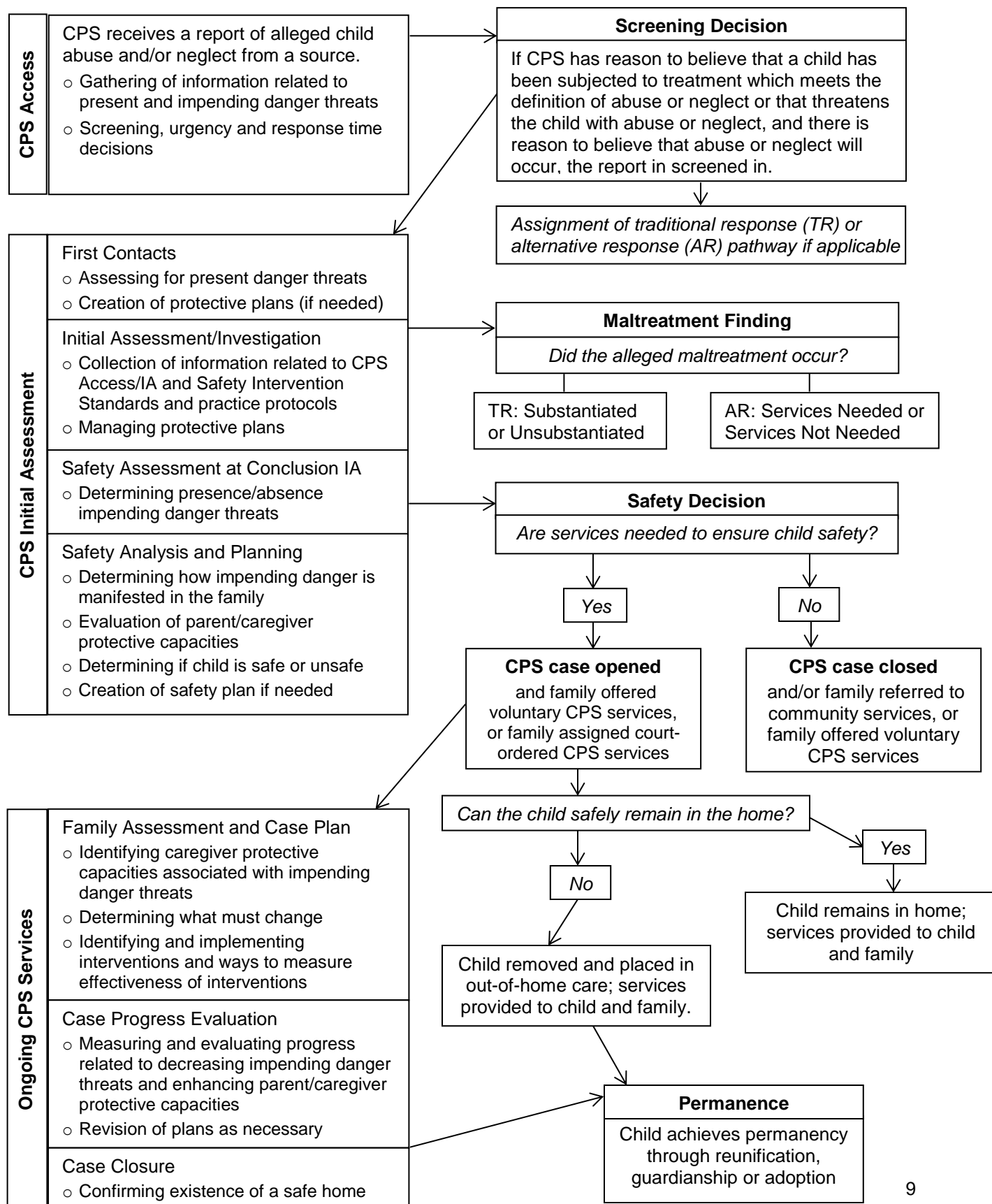
Enhancements to the Initial Assessment case record review instrument were identified. The review process also identified questions that were not considered when the review instrument was being developed and tested. For example, the use of “some” as an answer should be further clarified to identify when comprehensive information is gathered for some case members and when information is not gathered comprehensively on all case members. This would provide additional capability to analyze the thoroughness of information gathering and documentation at Initial Assessment. Updating the IA review instrument will also allow for a deeper understanding of necessary collateral contacts. The current instrument only identified the category of the necessary collateral contacts that were missed, but did not identify which necessary collateral contact categories were contacted or who the reporter was. The instrument will also be updated to allow for a standardized method of collecting reviewer comments.

Appendix B: Practice Review and Outcome Crosswalk

Wisconsin's Child Welfare System Practice and Outcome Review Crosswalk (Initial Assessment)

	Intended Result(s) for Children and Families	Administrative/ Quantitative Data	Qualitative Practice Review Component(s)	CFSR Item	Organizational Factors	Outcome Measure(s) and CFSR National Standards
Initial Assessment (IA)	<ul style="list-style-type: none"> Children and their caregivers and families, including their strengths, concerns and needs, are well understood by the CPS agency, which gathers information from the family and key collateral contacts Children and their caregivers and families receive intervention from the CPS agency that match concerns and needs and are provided in the least intrusive manner to ensure child safety. Children and their caregivers and families experience CPS agency intervention and services in a culturally responsive and trauma informed manner. 	<ul style="list-style-type: none"> IA types (Caregiver vs. Non-caregiver and Traditional vs. Alternative Response) IA by maltreatment allegation type IA by maltreater relationship to alleged victim(s) IA maltreatment allegation findings and IA disposition result (open vs. closed) For IAs that result in open disposition: proportion of those cases and children served in the family home and those cases with one or more children placed in out of home Public Disclosure records BRO Incident / Complaint Report information by type 	<ul style="list-style-type: none"> Information gathering timeliness, quality and thoroughness to understand and address threats to child safety or risk of maltreatment Effective and appropriate analysis and synthesis of information gathered support safety assessment, protective planning, and safety planning responsibilities and documentation Effective application of analysis in decision-making regarding IA disposition and if opened, level of intervention Family and collateral contacts key to the case are engaged and effectively transitioned when agency intervention is necessitated, including shared understanding of child safety, roles, responsibilities when applicable Proper assignment of the timeframes for timing and types of contacts related to IA process Timely resolution of initial assessment and notification to the family, including appeal rights Proper notice and timely involvement tribal child welfare involvement is provided for a tribal child 	2 & 3	<ul style="list-style-type: none"> Agency responsiveness to and collaboration with community partners Agency staff training and supervision Staff recruitment and retention Legal communities Agency culture and policies Service array Information system 	<ul style="list-style-type: none"> X% of families closed at the conclusion of the IA do not have a subsequent maltreatment substantiation or unsafe child finding within X months (Re-referral) X% of children who are found to be substantiated victims are not re-victimized within X months of the maltreatment finding (Re-maltreatment) X% of families with a completed IA in which the case is opened for Ongoing Services have the children remain intact versus out-of-home placement X% of IAs are completed (approved) in a timely manner X% of initial case contacts for an IA occur in a timely manner

Appendix C: IA Safety Decision-Making/CPS Flowchart



Appendix D: Initial Assessment Review Instrument

Case Name and eWiSACWIS Case Number		Assessment ID	County Reviewed
Name – Initial Assessment Worker		Name – Initial Assessment Supervisor	
Date of Screened-in Report(s)	Name – Reviewer		Date of Review
Report Type: <input type="checkbox"/> CPS Primary <input type="checkbox"/> CPS Secondary/ Non-Caregiver		Response Type: <input type="checkbox"/> Traditional <input type="checkbox"/> Alternative	
Reporter: <input type="checkbox"/> Mandated <input type="checkbox"/> Relative <input type="checkbox"/> Other	Did this case have a program assignment of In Home Safety Services? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> One child included within the IA	Were all required children included within the IA? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> Multiple children included within the IA			
<input type="checkbox"/> One alleged victim included within the IA	Were all required alleged victims included within the IA? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> Multiple alleged victims included within the IA			
<input type="checkbox"/> One parent/caregiver included within the IA	Were all required parents/caregivers included within the IA? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> Multiple parents/caregivers included within the IA			
Did this case have a case disposition of “unable to locate source?” <input type="checkbox"/> Yes <input type="checkbox"/> No		If the reviewer answered “Yes” to the previous case disposition question, then answer the following: Were diligent efforts made to contact the parents/caregivers? <input type="checkbox"/> Yes <input type="checkbox"/> No	

A. PRESENT DANGER ASSESSMENT (Primary Assessments)

Wisconsin Child Protective Services Safety Intervention Standards, Section II, II.A.-II.C., pp. 6-8.

1. Did the agency assess the correct household where safety threats presented?

- ☐ Yes, the agency assessed the correct household.
- ☐ No (check all that apply):
- ☐ The agency assessed the wrong household.
 - ☐ The agency should have also assessed an additional household separately.

2. a. Did the worker identify present danger at initial face-to-face contact for the alleged victim(s)?

☐ Yes ☐ No

Does the reviewer agree that there was present danger at initial face-to-face contact?

- ☒ Yes ☐ No
- ☐ Not enough **key** information documented in IA to accurately assess the presence or absence of present danger

Does the reviewer agree that there was no present danger at initial face-to-face contact?

- ☐ Yes ☐ No
- ☐ Not enough **key** information documented in IA to accurately assess the presence or absence of present danger

Comments:

If the reviewer answered “Yes” to the first part of 2.a. (“Did the worker identify present danger at initial face-to-face contact?”), then answer 2.b. If the Reviewer answered “No” to the first part of 2.a., proceed to question 3.

b. Does the reviewer agree with the present danger threats identified at initial face-to-face contact for the alleged victim(s)?

- ☐ Yes, *all* present danger threats were accurately identified.
- ☐ No (check all that apply):
- ☐ One or more *additional* present danger threats should have been identified.
 - ☐ One or more present danger threats were *misidentified*.
 - ☐ One or more present danger threats were *inaccurately* identified.
 - ☐ Not enough **key** information documented in IA to assess accuracy of one or more identified present danger threats.

Comments:

3. a. Did the worker identify additional present danger during the Initial Assessment process?

☐ Yes

☐ No

Does the reviewer agree that there was present danger?

Does the reviewer agree that there was *no* additional present danger?

- ☐ Yes ☐ No
- ☐ Not enough **key** information documented in IA to accurately assess the presence or absence of present danger

- ☐ Yes ☐ No
- ☐ Not enough **key** information documented in IA to accurately assess the presence or absence of present danger

Comments:

If the reviewer answered "Yes" to the first part of 3.a. ("Did the worker identify additional present danger during Initial Assessment?"), then answer 3.b. If the Reviewer answered "No" to the first part of 3.a., proceed to question 4.

b. Does the reviewer agree with the additional present danger threats identified for all other children in the household?

- ☐ Yes, *all* present danger threats were accurately identified.
- ☐ No (check all that apply):
- ☐ One or more *additional* present danger threats should have been identified.
 - ☐ One or more *additional* present danger threats were *misidentified*.
 - ☐ One or more *additional* present danger threats were *inaccurately* identified.
 - ☐ Not enough **key** information documented in IA to assess accuracy of one or more identified present danger threats.

Comments:

4. Was a Protective Plan created?

☐ Yes (check all that apply):

- ☐ Protective Plan document
- ☐ Temporary Physical Custody Order (TPC)
- ☐ Voluntary Placement Agreement (VPA)
- ☐ Other court order

☐ No

- ☐ Protective Plan was needed and not developed
- ☐ Protective Plan was not needed and not developed
- ☐ Not enough **key** information documented to assess whether or not a Protective Plan was needed

Comments:

If the reviewer answered "No" to question 4, skip the remainder of Section A and proceed to Section B on page 5.

5. Was the Protective Plan immediately implemented?

☐ Yes ☐ No

6. Was protective planning sufficient to control for all present danger throughout the IA?

- ☐ Yes, Protective Plan was sufficient to control for *all* present danger threats for *all* children
- ☐ No (check all that apply):
 - ☐ Protective Plan was sufficient to control for *some* present danger threats
 - ☐ Protective Plan was sufficient to control for present danger threats for *some* children
 - ☐ Protective Plan was sufficient to control for *none* of the present danger threats

If the reviewer selected "Protective Plan" in the second part of question 4 above, proceed to question 7 below. If the reviewer selected any other option (TPC, VPA or other), skip questions 7 through 11 and proceed to question 12 on page 5.

7. a. How many participants/providers were involved in the Protective Plan document?

- ☐ One participant/provider
- ☐ Multiple participants/providers

b. Does the Protective Plan document that the reliability, commitment, and availability of each participant/provider to control for safety was confirmed prior to implementation?

i. Reliability

- ☐ Yes - *all*
- ☐ No - *some*
- ☐ No - *none*

ii. Commitment

- ☐ Yes - *all*
- ☐ No - *some*
- ☐ No - *none*

iii. Availability

- ☐ Yes - *all*
- ☐ No - *some*
- ☐ No - *none*

8. Did the Protective Plan contain the following required information to control for present danger threats (PDTs) for *all* children in the household?

a. Identification of present danger threat(s)

- ☐ Yes - *all*
- ☐ No - *some*
- ☐ No - *none*

d. Name(s) of the responsible/protective adult related to each protective action and an explanation of his/her relationship to the family

- ☐ Yes - *all*
- ☐ No - *some*
- ☐ No - *none*

b. How the plan is intended to control identified threat(s) to each child

- ☐ Yes - *all*
☐ No - *some*
☐ No - *none*

c. Specific actions/services to control PDTs (with frequency and duration)

- ☐ Yes - *all*
☐ No - *some*
☐ No - *none*

e. Alleged maltreater access to the child(ren)

- ☐ Yes - *all*
☐ No - *some*
☐ No - *none*

f. How CPS will oversee/manage the Protective Plan, including communication with the family and providers

- ☐ Yes
☐ No

9. Were the required communications, actions, and supervisory consultation completed?

a. Explanation to parents/caregivers of the reason(s) present danger exists

- ☐ Yes ☐ No

b. Consult with a supervisor or her/his designee by the next working day

- ☐ Yes ☐ No

10. Was/were the child(ren) temporarily outside of the home as part of the Protective Plan?

☐ Yes

☐ No

If multiple children were temporarily outside the home, did they go to the same home or different homes?

- ☐ Children went to the same home
☐ Children went to different homes

Only answer question 11 if the reviewer selected "Yes" in question 10. Question 11 is only applicable when there was a negotiated arrangement. If there was no negotiated arrangement, proceed to question 12.

11. If a Protective Plan was implemented in which children were temporarily outside the home as part of a negotiated arrangement, was safety in the unlicensed home(s) confirmed?

a. Assessment of safety in the unlicensed home(s) through direct contact prior to implementation of the Protective Plan

- ☐ Yes - *all homes/care providers*
☐ No - *some homes/care providers*
☐ No - *none homes/care providers*

d. Check of law enforcement records on *all* required individuals residing in the home requested within 24 hours

- ☐ Yes - *all required individuals*
☐ No - *some required individuals*
☐ No - *none required individuals*

b. Discussion of expectations an provider's role *prior* to the child(ren) entering home

- ☐ Yes - *all homes/care providers*
☐ No - *some homes/care providers*
☐ No - *none homes/care providers*

e. CPS records check conducted within 24 hours for *all* required individuals

- ☐ Yes - *all required individuals*
☐ No - *some required individuals*
☐ No - *none required individuals*

c. Home visit conducted within 24 hours

- ☐ Yes - *all homes/care providers*
☐ No - *some homes/care providers*
☐ No - *none homes/care providers*

Only answer question 12 if the reviewer selected TPC, VPA, or Other Court Order in question 4

12. If a child was placed in an unlicensed or licensed home as part of a Temporary Physical Custody Order (TPC), Voluntary Placement Agreement (VPA), or other court order, were the requirements of Confirming Safe Environments (CSE) in met for all applicable children?

- ☐ Yes – all applicable children
☐ No – some applicable children
☐ No – none applicable children

B. INFORMATION GATHERING and ANALYSIS (All Assessments)

Wisconsin Child Protective Services Access and Initial Assessment Standards, Section 2, Chapter 14, XIV.E., pp. 50; Appendix 3, pp. 93-98; Alternative Response Addendum; and Wis. Stat. §48.981(3m)

Maltreatment

Only applicable for Primary (Traditional Response) and Secondary Assessments

1. Does the assessment narrative contain a comprehensive description of the extent of the maltreatment and the supporting documentation for maltreatment determinations to accurately assess safety (and supporting documentation for court intervention, if applicable)?

a. Detailed description of all types of maltreatment

- ☐ Yes – all maltreatment types
☐ No – some maltreatment types
☐ No – none maltreatment types

d. Supporting documentation for maltreatment determinations

- ☐ Yes – all maltreatment types
☐ No – some maltreatment types
☐ No – none maltreatment types

b. Specific information about injury or condition(s) for all applicable children

- ☐ Yes – all injuries/conditions for all children
☐ No – some injuries/conditions
☐ No – some children
☐ No – none of the injuries/conditions and none of the children

e. Supporting documentation for court intervention

- ☐ Yes
☐ No
☐ Not applicable

c. Description of medical findings for all applicable children

- ☐ Yes – all findings for all children
☐ No – some findings
☐ No – some children
☐ No – none of the findings and none of the children
☐ Not applicable

Surrounding Circumstances

Only applicable for Primary (Traditional Response) and Secondary Assessments

2. Does the assessment narrative contain a comprehensive description of the surrounding circumstances to accurately assess safety?

a. Circumstances accompanying or leading up to the maltreatment

- ☐ Yes ☐ No

b. Parents'/caregivers' explanation of maltreatment

- ☐ Yes ☐ No

Child Functioning

Only applicable for Primary Assessments (both Traditional and Alternative Response)

(Skip Child Functioning if the assessment is for unborn child abuse and no other children reside in the home)

3. Does the assessment narrative contain a comprehensive description of functioning for all children in the household to accurately assess safety?

a. Capacity for attachment

- ☐ Yes – *all* children
- ☐ No – *some* children
- ☐ No – *none* children

b. General temperament

- ☐ Yes – *all* children
- ☐ No – *some* children
- ☐ No – *none* children

c. Expressions of emotions/feelings

- ☐ Yes – *all* children
- ☐ No – *some* children
- ☐ No – *none* children

d. Typical behaviors

- ☐ Yes – *all* children
- ☐ No – *some* children
- ☐ No – *none* children

e. Presence and level of peer relationships

- ☐ Yes – *all* children
- ☐ No – *some* children
- ☐ No – *none* children
- ☐ Not applicable

f. School performance and behaviors

- ☐ Yes – *all* children
- ☐ No – *some* children
- ☐ No – *none* children
- ☐ Not applicable

g. Known mental health disorders

- ☐ Yes – *all* children
- ☐ No – *some* children
- ☐ No – *none* children
- ☐ Not applicable

h. Independence/dependence

- ☐ Yes – *all* children
- ☐ No – *some* children
- ☐ No – *none* children

i. Motor skills and physical capacity

- ☐ Yes – *all* children
- ☐ No – *some* children
- ☐ No – *none* children

j. Effects of maltreatment on the child(ren)'s functioning

- ☐ Yes – *all* children
- ☐ No – *some* children
- ☐ No – *none* children
- ☐ Not applicable

Adult Functioning

Only applicable for Primary Assessments (both Traditional and Alternative Response)

4. Does the assessment narrative contain a comprehensive description of functioning for all adults living in the household to accurately assess safety?

a. Communication

- ☐ Yes – *all* adults
- ☐ No – *some* adults
- ☐ No – *none* adults

b. Coping/stress management

- ☐ Yes – *all* adults
- ☐ No – *some* adults
- ☐ No – *none* adults

c. Impulse control/judgment

- ☐ Yes – *all* adults
- ☐ No – *some* adults
- ☐ No – *none* adults

d. Problem solving/decision making skills

- ☐ Yes – *all* adults
- ☐ No – *some* adults
- ☐ No – *none* adults

e. AODA

- ☐ Yes – *all* adults
- ☐ No – *some* adults
- ☐ No – *none* adults

f. Mental health

- ☐ Yes – *all* adults
- ☐ No – *some* adults
- ☐ No – *none* adults

g. Independence, money/home management

- ☐ Yes – *all* adults
- ☐ No – *some* adults
- ☐ No – *none* adults

h. Employment/education

- ☐ Yes – *all* adults
- ☐ No – *some* adults
- ☐ No – *none* adults

i. Social relationships, citizenship/community involvement, and other basic life skills

- ☐ Yes – *all* adults
- ☐ No – *some* adults
- ☐ No – *none* adults

j. General criminal behavior

- ☐ Yes – *all* adults
- ☐ No – *some* adults
- ☐ No – *none* adults

k. Domestic violence behavior

- ☐ Yes – *all* adults
- ☐ No – *some* adults
- ☐ No – *none* adults

l. Relevant information from previous assessments/childhood

- ☐ Yes – *all* adults
- ☐ No – *some* adults
- ☐ No – *none* adults

Discipline

Only applicable for Primary Assessments (both Traditional and Alternative Response)

5. Does the assessment narrative contain a comprehensive description of the disciplinary practices used with all of the children in the household to accurately assess safety?

a. Disciplinary methods used

- ☐ Yes – *all* parents/caregivers and *all* children
- ☐ No – *some* parents/caregivers
- ☐ No – *some* children
- ☐ No – *none* of the parents/caregivers and *none* of the children

d. Identification of the extent to which the parent(s)/caregiver(s) demonstrate self-control when disciplining

- ☐ Yes – *all* parents/caregivers and *all* children
- ☐ No – *some* parents/caregivers
- ☐ No – *some* children
- ☐ No – *none* of the parents/caregivers and *none* of the children

b. Identification of behaviors that are and are not tolerated

- ☐ Yes – *all* parents/caregivers and *all* children
- ☐ No – *some* parents/caregivers
- ☐ No – *some* children
- ☐ No – *none* of the parents/caregivers and *none* of the children

c. Information on the use of a variety of disciplinary approaches suited to the child(ren)'s age and needs

- ☐ Yes – *all* parents/caregivers and *all* children
- ☐ No – *some* parents/caregivers
- ☐ No – *some* children
- ☐ No – *none* of the parents/caregivers and *none* of the children

e. Identification of the parent(s)/caregiver(s)' views on discipline

- ☐ Yes – *all* parents/caregivers and *all* children
- ☐ No – *some* parents/caregivers
- ☐ No – *some* children
- ☐ No – *none* of the parents/caregivers and *none* of the children

Parenting Practices

Only applicable for Primary Assessments (both Traditional and Alternative Response)

6. Does the assessment narrative contain a comprehensive description of the parenting practices to accurately assess safety?

a. Parents' perception of child(ren)

- ☐ Yes – *all* parents/caregivers and *all* children
- ☐ No – *some* parents/caregivers
- ☐ No – *some* children
- ☐ No – *none* of the parents/caregivers and *none* of the children

b. Reasons for being a parent

- ☐ Yes – *all* parents/caregivers and *all* children
- ☐ No – *some* parents/caregivers
- ☐ No – *some* children
- ☐ No – *none* of the parents/caregivers and *none* of the children

c. Feelings about being a parent

- ☐ Yes – *all* parents/caregivers and *all* children
- ☐ No – *some* parents/caregivers
- ☐ No – *some* children
- ☐ No – *none* of the parents/caregivers and *none* of the children

d. Knowledge and general skill/basic care

- ☐ Yes – *all* parents/caregivers and *all* children
- ☐ No – *some* parents/caregivers
- ☐ No – *some* children
- ☐ No – *none* of the parents/caregivers and *none* of the children

e. Nurturance/parenting style

- ☐ Yes – *all* parents/caregivers and *all* children
- ☐ No – *some* parents/caregivers
- ☐ No – *some* children
- ☐ No – *none* of the parents/caregivers and *none* of the children

f. Expectations for child(ren)

- ☐ Yes – *all* parents/caregivers and *all* children
- ☐ No – *some* parents/caregivers
- ☐ No – *some* children
- ☐ No – *none* of the parents/caregivers and *none* of the children

Family Functioning

Only applicable for Primary Assessments (both Traditional and Alternative Response)

7. Does the assessment narrative contain a comprehensive description of family functioning?

- | | |
|---|--|
| <p>a. Clarity around roles and boundaries in the family</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> | <p>d. General climate within the family</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> |
| <p>b. Level and type of communication</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> | <p>e. Relationship to the community</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> |
| <p>c. Marital concerns/presence or absence of domestic violence</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> | <p>f. Ability to meet the family's needs (access economic resources)</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> |

CPS Issues and Family Strengths and Needs

Only applicable for Primary Assessments (Alternative Response)

8. Does the assessment narrative contain a comprehensive description of the presenting CPS Issues and Family Strengths and Needs to accurately assess safety?

- | | |
|--|--|
| <p>a. Description of presenting issue(s) leading up to CPS involvement</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> | <p>c. Information about family needs</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> |
| <p>b. Information about family strengths</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> | |

Child and Family's Response to Maltreatment

Only applicable for Secondary Assessments

9. Does the assessment narrative contain a comprehensive description of the child and family response to the maltreatment?

- | | |
|--|---|
| <p>a. Child(ren)'s response to maltreatment</p> <p><input type="checkbox"/> Yes – <i>all</i> children</p> <p><input type="checkbox"/> No – <i>some</i></p> <p><input type="checkbox"/> No – <i>none</i></p> | <p>c. Actions to provide protection and services if needed</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Not applicable</p> |
| <p>b. Parental reaction to maltreatment</p> <p><input type="checkbox"/> Yes – <i>all</i> parents/caregivers</p> <p><input type="checkbox"/> No – <i>some</i></p> <p><input type="checkbox"/> No – <i>none</i></p> | <p>d. Response of the part of facility staff or other responsible adults</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Not applicable</p> |

10. Based on the information contained in the Initial Assessment, was the assignment of Secondary/Non-Caregiver correct?

- ☐ Yes, Secondary/Non-Caregiver assessment was correct
☐ No, the agency should have conducted a Primary Assessment
☐ Not enough **key** information contained in the IA to determine

C. SAFETY ASSESSMENT and SAFETY ANALYSIS AND PLAN (Primary Assessments)

Wisconsin Child Protective Services Safety Intervention Standards, Section V, V.A-V.C.3., pp. 9-13; Safety Appendix 6, The Danger Threshold and Impending Danger Threats to Child Safety; Access and Initial Assessment Standards, Chapter 14, Section XIV.G, pp. 51; Appendix 3, pp. 93-98; and Safety Reference Guide pp. 18-20. Utilize SAP created at the end of the Initial Assessment.

1. a. Did the worker identify impending danger during Initial Assessment?

☐ Yes

☐ No

Does the reviewer agree that there was impending danger?

- ☐ Yes ☐ No
☐ Not enough **key** information documented in IA to accurately assess the presence or absence of impending danger

Does the reviewer agree that there was no impending danger?

- ☐ Yes ☐ No
☐ Not enough **key** information documented in IA to accurately assess the presence or absence of impending danger

Comments:

If the reviewer answered "Yes" to the first part of 1.a. ("Did the worker identify impending danger during Initial Assessment?"), then answer 1.b. and 1.c. If the Reviewer answered "No" to the first part of 1.a., skip to question 2.

b. Does the reviewer agree with the impending danger threats documented in the Safety Assessment?

- ☐ Yes, *all* impending danger threats were accurately identified.
☐ No (check all that apply):
☐ One or more *additional* impending danger threats should have been identified for a different observable condition.
☐ One or more impending danger threats were *misidentified*.
☐ One or more impending danger threats were *inaccurately* identified.
☐ Not enough **key** information documented in IA to assess accuracy of one or more identified impending danger threats.

Comments:

c. Does the agency description of the unsafe condition(s) support the identified impending danger threat(s)?

☐ Yes

☐ Some

☐ No

☐ Multiple impending danger threats were incorrectly identified for the same family condition(s)

Comments:

2. Was a Safety Analysis and Plan (SAP) created?

☐ Yes

☐ No:

☐ SAP was needed and not developed

☐ SAP was not needed and not developed

☐ Not enough **key** information documented to assess whether or not a SAP was needed

Comments:

If the reviewer selected "No" for question 2, skip questions 3 through 6 and proceed to question 7.

3. Which choice did the agency select in the Safety Analysis and Plan for the question "Can and will the non-maltreating parent or another adult in the home protect the children?"

☐ Yes

☐ No

☐ N/A

If reviewer selected "Yes" for question 3, answer question 4. If the reviewer selected any other option, skip question 4 and proceed to question 5.

4. Does the documentation support the worker's assessment of that person's willingness, ability and capacity to provide protection?

☐ Yes, documentation comprehensively describes how the non-maltreating parent's/caregiver's or other adult's protective capacities can and will manage all of the identified impending danger threat(s) and justifies that the child(ren) is/are safe and no further safety intervention is needed.

☐ No, documentation does not comprehensively describe the non-maltreating parent's/caregiver's or other adult's willingness, ability, and capacity to protect the child(ren) from all of the identified impending danger threat(s).

If reviewer selected "Yes" for question 3 and question 4 above, proceed to question 7.

5. Does the assessment support the worker's analysis of the safety plan?

☐ Yes

☐ No

☐ Not enough **key** information documented in IA to make a determination

Reviewer should skip question 6 and proceed to question 7 below if there was no in-home safety plan

6. Does the in-home safety plan sufficiently control the impending danger threats (IDTs) throughout the Initial Assessment?

a. Description of the specific IDTs

- ☐ Yes – *all* IDTs
- ☐ No – *some* IDT's
- ☐ No – *none* IDT's

e. Frequency and duration of services/action

- ☐ Yes – *all* services/actions
- ☐ No – *some* services/actions
- ☐ No – *none* services/actions

b. Safety services used to managed IDTs

- ☐ Yes – *all* safety services
- ☐ No – *some* safety services
- ☐ No – *none* safety services

f. Necessary services/action/providers exist and are available at level/time required

- ☐ Yes- *all* services/actions/providers
- ☐ No – *some* services/actions/providers
- ☐ No – *none* services/actions/providers

c. Names of safety services providers

- ☐ Yes – *all* providers
- ☐ No – *some* providers
- ☐ No – *none* providers

g. How CPS will manage/oversee the safety plan

- ☐ Yes
- ☐ No

d. Roles and responsibilities of providers

- ☐ Yes – *all* providers
- ☐ No – *some* providers
- ☐ No – *none* providers

7. Was safety actively managed throughout the Initial Assessment process?

- ☐ Yes
- ☐ No

8. Was safety actively managed throughout case transition?

- ☐ Yes
- ☐ No
- ☐ Not applicable (case closed at Initial Assessment)

9. Did a timely case transition meeting occur?

- ☐ Yes
- ☐ No
- ☐ Not applicable (case closed at Initial Assessment)

D. FAMILY INTERACTION (Primary Assessments, Traditional Response Only)

Wisconsin Child Protective Services Access and Initial Assessment Standards, Section 2, Chapter 14, XIV.H., pp. 51

Reviewer only answers question 1 if there was a TPC, VPA, or other court order

1. Did the initial family interaction occur within five business days of out-of-home-care placement?

- ☐ Yes
- ☐ No

E. TIMEFRAMES AND INTERVIEW PROTOCOL (Primary Assessments)

Wisconsin Child Protective Services Access and Initial Assessment Standards, Section 1, Chapter 7, VII.A., pp. 25-26; Section 2, Chapter 12, XII.L., pp. 41; Chapter 14, XIV.C., pp. 49; and Ref. s. 48.981(3)(c)4

1. Did the Initial Assessment worker make face-to-face contact with the alleged victim(s) within the assigned response time?

- ☐ Yes – all victims
☐ No – some victims
☐ No – none victims

2. Did the Initial Assessment worker make face-to-face contact with the parent(s)/caregiver(s) within the assigned response time?

- ☐ Yes ☐ No

3. Did a home visit take place where the alleged maltreatment occurred or where threats to child(ren)'s safety existed?

- ☐ Yes ☐ No

4. Did a face-to-face interview/observation occur with all required household members?

- ☐ Yes – all required household members
☐ No – some
☐ No – none

5. Did an interview occur with the non-custodial parent(s) OR is there documentation to support why the interview did not occur?

- ☐ Yes – all required non-custodial parents ☐ There is documentation to support reason(s) why interview(s) did not occur
☐ No – some ☐ Not applicable
☐ No – none

6. Were necessary collateral contacts made?

- ☐ Yes ☐ No

What kind of key collateral contact was missed?

- ☐ Doctor or other medical professional
☐ Police, probation officer, or other law enforcement
☐ Therapist or other mental health professional
☐ Teacher, school social worker, or other educational staff
☐ Family member(s) ☐ Friends(s)
☐ Neighbor(s) ☐ Other:

Comments:

F. AMERICAN INDIAN HERITAGE (All Assessments)

Wisconsin Child Protective Services Access and Initial Assessment Standards, Section 2, Chapter 12, XII.B., Indian Child Welfare Act Requirements, pp. 37-39; DCFS Numbered Memo Series 2006-01, "Documentation of Certain Indian Child Welfare Act (ICWA) Requirements," pp. 2-8; and DSP Informational Memo 2010-08, "WICWA Statewide Implementation Initiatives"

1. a. Has the "Screening for the Child's Status as Indian" form (DCF-F-CFS2322) been completed in e-WiSACWIS for each child?

- ☐ Yes – all children
☐ No – some
☐ No – none

- b. For how many children was American Indian Heritage indicated?

If reviewer answers "none" in 1.a. or "0" in 1.b., skip the remainder of Section F.

2. Has the "Child's Biological Family History" form (DCF-F-CFS2323) been completed in e-WiSACWIS for each American Indian child?

- ☐ Yes – all applicable children
☐ No – some:
☐ No – none

3. Has the "Request for Confirmation of Child's Indian Status" form been completed for each child with American Indian heritage?

- ☐ Yes – all applicable children
☐ No – some:
☐ No – none

4. Did a consultation with the tribal agency occur?

- ☐ Yes
☐ No

G. CONCLUSION (All Assessments)

Wisconsin Child Protective Services Access and Initial Assessment Standards, Section 2, Chapter 12, XII.J., Feedback to a Mandated Reporter, pp. 40; Chapter 12, XII.K., Feedback to a Relative Reporter, pp. 40; Chapter 14, XIV.G., Conclusion of the Initial Assessment, pp. 51; Chapter 20, XX.A., Determination of Maltreatment and Maltreaters, pp. 60; and Appendix 1, pp. 77; Appendix 2, pp. 84; and Appendix 7, pp. 118

1. a. What was the safety determination at the conclusion of the Initial Assessment?

- ☐ Safe ☐ Unsafe

- b. Does the reviewer agree with this safety determination?

- ☐ Yes ☐ Not enough key information documented in IA to accurately assess safety determination
☐ No

For Alternative Response Assessments, skip question 2 and question; proceed to question 4.

2. Maltreater and Maltreatment Determinations

a. Were all alleged victims accurately identified?

☐ Yes

☐ No (check all that apply):

☐ Other child(ren) in household should have also been alleged victim(s).

☐ Physical abuse

☐ Emotional abuse

☐ Unborn child abuse

☐ Sexual abuse

☐ Neglect

☐ Not enough information contained in IA to assess the accuracy of alleged victim(s):

☐ Physical abuse

☐ Emotional abuse

☐ Unborn child abuse

☐ Sexual abuse

☐ Neglect

☐ Not enough information
to assess any victims

b. Were all alleged maltreaters accurately identified?

☐ Yes

☐ No (check all that apply):

☐ Other maltreater(s) in household should have also been identified:

☐ Unknown maltreater ☐ Named maltreater

☐ An unknown maltreater should have been named:

☐ Physical abuse

☐ Emotional abuse

☐ Unborn child abuse

☐ Sexual abuse

☐ Neglect

☐ A named maltreater should have been unknown:

☐ Physical abuse

☐ Emotional abuse

☐ Unborn child abuse

☐ Sexual abuse

☐ Neglect

☐ There should have been an additional named maltreater:

☐ Physical abuse

☐ Emotional abuse

☐ Unborn child abuse

☐ Sexual abuse

☐ Neglect

☐ There should have been a different named maltreater/relationship to victim was incorrect:

☐ Physical abuse

☐ Emotional abuse

☐ Unborn child abuse

☐ Sexual abuse

☐ Neglect

☐ Not enough information contained in IA to assess the accuracy of alleged maltreater(s):

☐ Physical abuse

☐ Emotional abuse

☐ Unborn child abuse

☐ Sexual abuse

☐ Neglect

☐ Not enough information to
assess any maltreaters

c. Were all allegations correct for all children?

☐ Yes

☐ No (check all that apply):

☐ Allegation(s) should have been of a different type:

<input type="checkbox"/> Physical abuse →		<input type="checkbox"/> Neglect →	
<input type="checkbox"/> Sexual abuse →		<input type="checkbox"/> Unborn child abuse →	
<input type="checkbox"/> Emotional abuse →			

☐ Missed allegation(s):

☐ Children were missed

☐ Physical abuse

☐ Emotional abuse

☐ Unborn child abuse

☐ Sexual abuse

☐ Neglect

☐ There should have been additional allegations:

☐ Physical abuse

☐ Emotional abuse

☐ Unborn child abuse

☐ Sexual abuse

☐ Neglect

☐ Not enough information contained in IA to assess the accuracy of allegation(s)

☐ Physical abuse

☐ Emotional abuse

☐ Unborn child abuse

☐ Sexual abuse

☐ Neglect

☐ Not enough information to assess any allegations

d. Does the reviewer agree with the substantiation/unsubstantiation results?

☐ Yes

☐ No (check all that apply):

☐ There were unsubstantiated allegations that should have been substantiated:

☐ Physical abuse

☐ Emotional abuse

☐ Unborn child abuse

☐ Sexual abuse

☐ Neglect

☐ There were substantiated allegations that should have been unsubstantiated:

☐ Physical abuse

☐ Emotional abuse

☐ Unborn child abuse

☐ Sexual abuse

☐ Neglect

☐ Not enough information contained in IA to assess the subs/unsubs results

☐ Physical abuse

☐ Emotional abuse

☐ Unborn child abuse

☐ Sexual abuse

☐ Neglect

☐ Not enough information to assess any results

3. Did the agency notify person(s) against whom a substantiated finding of child maltreatment was made of the right to appeal the decision?

☐ Yes – *all*

☐ No – *some*

☐ No – *none*

☐ Not applicable (no substantiated findings)

4. Does the reviewer agree with the case disposition at which the agency arrived?

☐ Yes

☐ No

☐ Not enough information contained in the IA to determine

Reviewers only answer question 5 if there was a mandated reporter.

5. Was feedback provided to the mandated reporter within 60 days of the report?

☐ Yes

☐ No

Reviewers only answer question 6 if there was a relative reporter.

6. Was feedback provided to the relative reporter within 20 days of receipt of the request?

☐ Yes

☐ No

☐ Not applicable (there is no indication the relative reporter requested feedback)

7. Does the Initial Assessment indicate a referral to the Birth-to-3 Program was made for all children under three years of age who were substantiated as having been maltreated?

☐ Yes

☐ No

☐ Not applicable (no children substantiated under three years of age or this is an Alternative Response Pathway)

2015 Version

Appendix E: Distribution of Counties in IA Review Sample

Table E-1. Distribution of Counties in the Random Sample.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.

County	No. IAs Reviewed		
Adams	3	Monroe	5
Barron	2	Oconto	2
Brown	17	Oneida	2
Buffalo	1	Outagamie	6
Burnett	3	Ozaukee	3
Chippewa	1	Pierce	1
Clark	2	Polk	3
Columbia	5	Portage	3
Dane	16	Price	1
Dodge	1	Racine	8
Door	1	Richland	1
Douglas	2	Rock	18
Eau Claire	3	Sauk	1
Fond Du Lac	5	Sawyer	4
Grant	2	Sheboygan	2
Green	2	St. Croix	2
Green Lake	1	Trempealeau	2
Iowa	1	Vernon	3
Jackson	1	Vilas	1
Jefferson	1	Walworth	3
Juneau	2	Washburn	1
Kenosha	7	Washington	4
La Crosse	1	Waukesha	5
Lincoln	2	Waupaca	4
Manitowoc	3	Waushara	3
Marathon	5	Winnebago	10
Marquette	1	Wood	7
Milwaukee	75		
		TOTAL	271

Appendix F: Additional Analyses

**Table F-1. Interview Contacts and Odds Ratios of Consistent IA Conclusions.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.**

	Safety Determination		Maltreatment Determination		Case Disposition	
	<i>Odds Ratio</i>	<i>(95% CI)</i>	<i>Odds Ratio</i>	<i>(95% CI)</i>	<i>Odds Ratio</i>	<i>(95% CI)</i>
All Necessary Collateral Contacts	9.7***	(4.6-20.4)	12.3***	(5.3-28.7)	9.5***	(4.3-21.2)
Timely Contact with All Victim(s)	2.4*	(1.1-5.0)	2.7*	(1.2-6.3)	3.7**	(1.7-8.3)
Contact with Non-Custodial Parents	1	(0.5-2.1)	1.1	(0.5-2.6)	1.2	(0.5-2.7)

***Statistically significant $p \leq 0.001$, **significant at $p \leq 0.01$, *significant at $p \leq 0.05$

Note: The odds ratio estimates above were obtained from three multivariate logistic regression models, one for each outcome (IA conclusion).

**Table F-2. Interview Contacts and Increased Documentation of Information Gathering.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015**

	Average Increase in Proportion of Information Items Comprehensively Documented when Interview Contact is Made Consistent with Standards
All Necessary Collateral Contacts	8.7%**
Timely Contact with All Victim(s)	5.7%*
Contact with Non-Custodial Parents	7.4%**

***Statistically significant $p \leq 0.001$, **significant at $p \leq 0.01$, *significant at $p \leq 0.05$

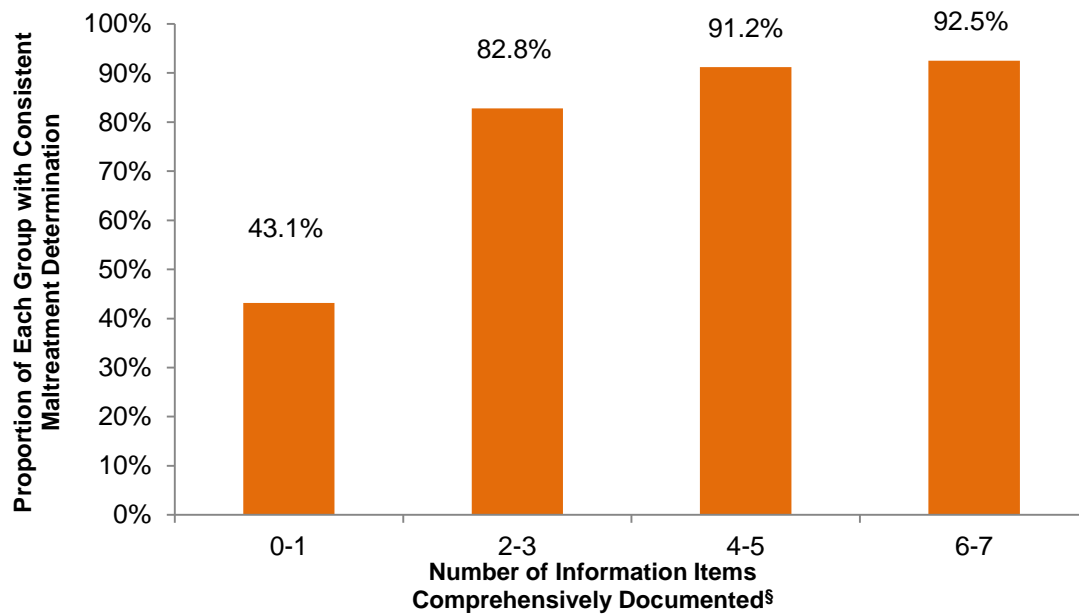
Note: The estimates above were obtained through multivariate linear regression. Intercept estimate = 18.8% ($p < .0001$).

**Table F-3. Information Gathering (by Quartile) and Odds Ratios of Consistent IA Conclusions.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015**

Compared to Lowest (0%-20% of total):	Safety Determination*** Consistent with Standards		Case Disposition*** Consistent with Standards	
	<i>Odds Ratio</i>	<i>(95% CI)</i>	<i>Odds Ratio</i>	<i>(95% CI)</i>
Documented over 50% of total applicable items	58.0*	(7.6-442.8)	48.6*	(6.4-371.2)
Documented 30%-50% of total applicable items	5.8*	(2.6-12.5)	5.3*	(2.4-11.8)
Documented 20%-30% of total applicable items	2.9*	(1.4-6.2)	4.0*	(1.8-8.9)

***Association is statistically significant ($p < .0001$)

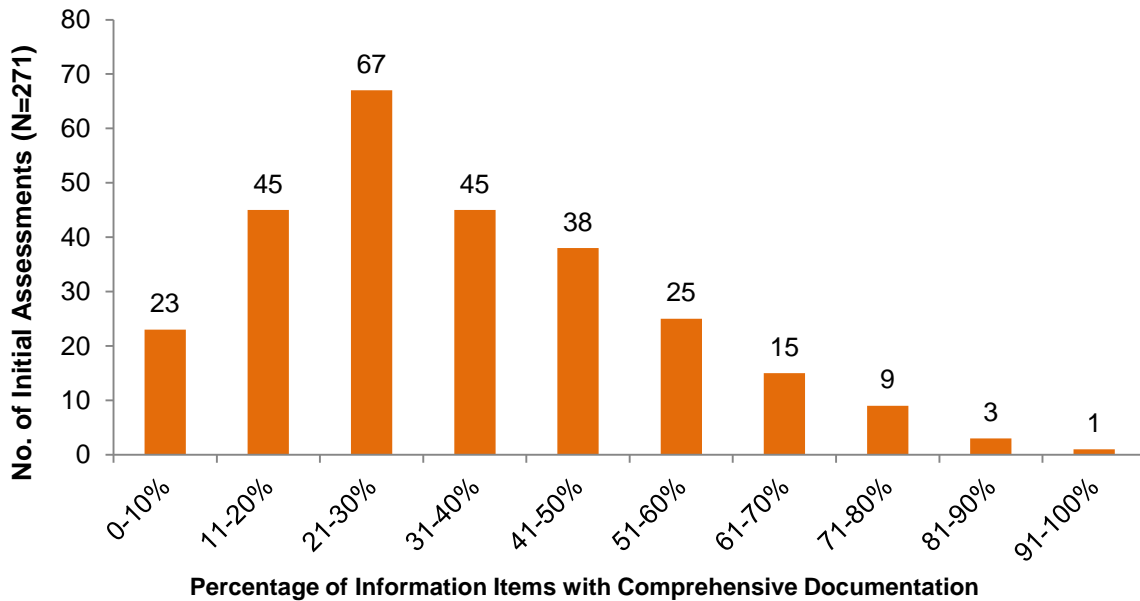
**Figure F-1. Information Gathering and Maltreatment Determination Consistent with Standards.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.**



[§]From Surrounding Circumstances and Maltreatment sections only.

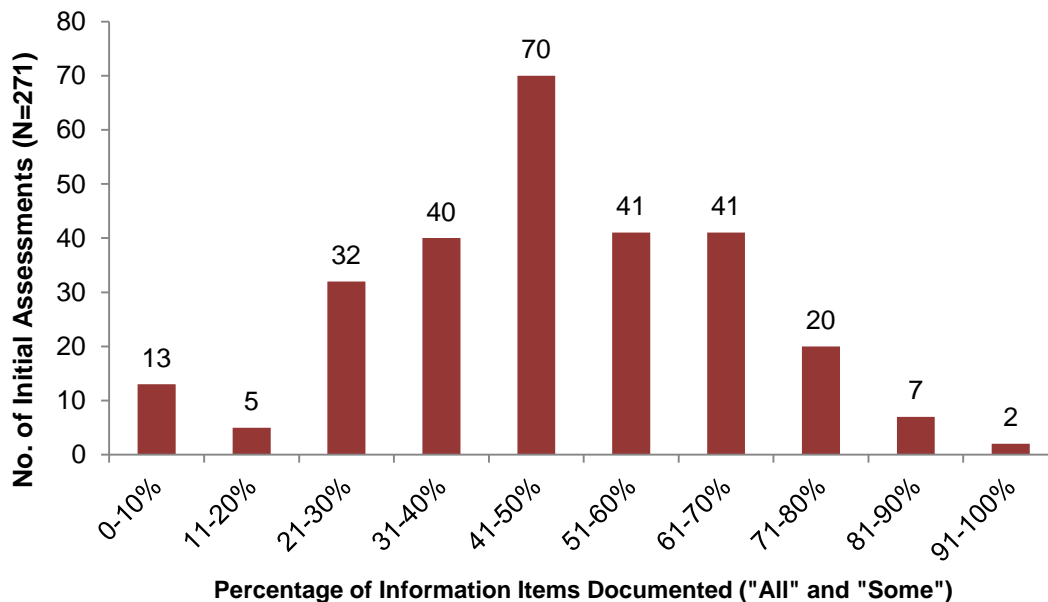
***Results statistically significant at $p < 0.0001$

Figure F-2. Distribution of Documentation of Information Items (by Percent) When “All” Were Comprehensively Documented.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.



Note: The average proportion of required information items comprehensively documented was 33.9% (median 30.8%), with a minimum of 0% (N=6) and maximum of 92.7% (N=1).

Figure F-3. Distribution of Documentation of Information Items (by Percent) When “All” or “Some” Were Documented.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.



Note: The average proportion of required information items with at least some documentation was 46.9% (median 47.7%), with a minimum of 0% (N=4) and maximum of 92.7% (N=1).

Figure F-4. Comprehensive Documentation of 46 Information Items.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.

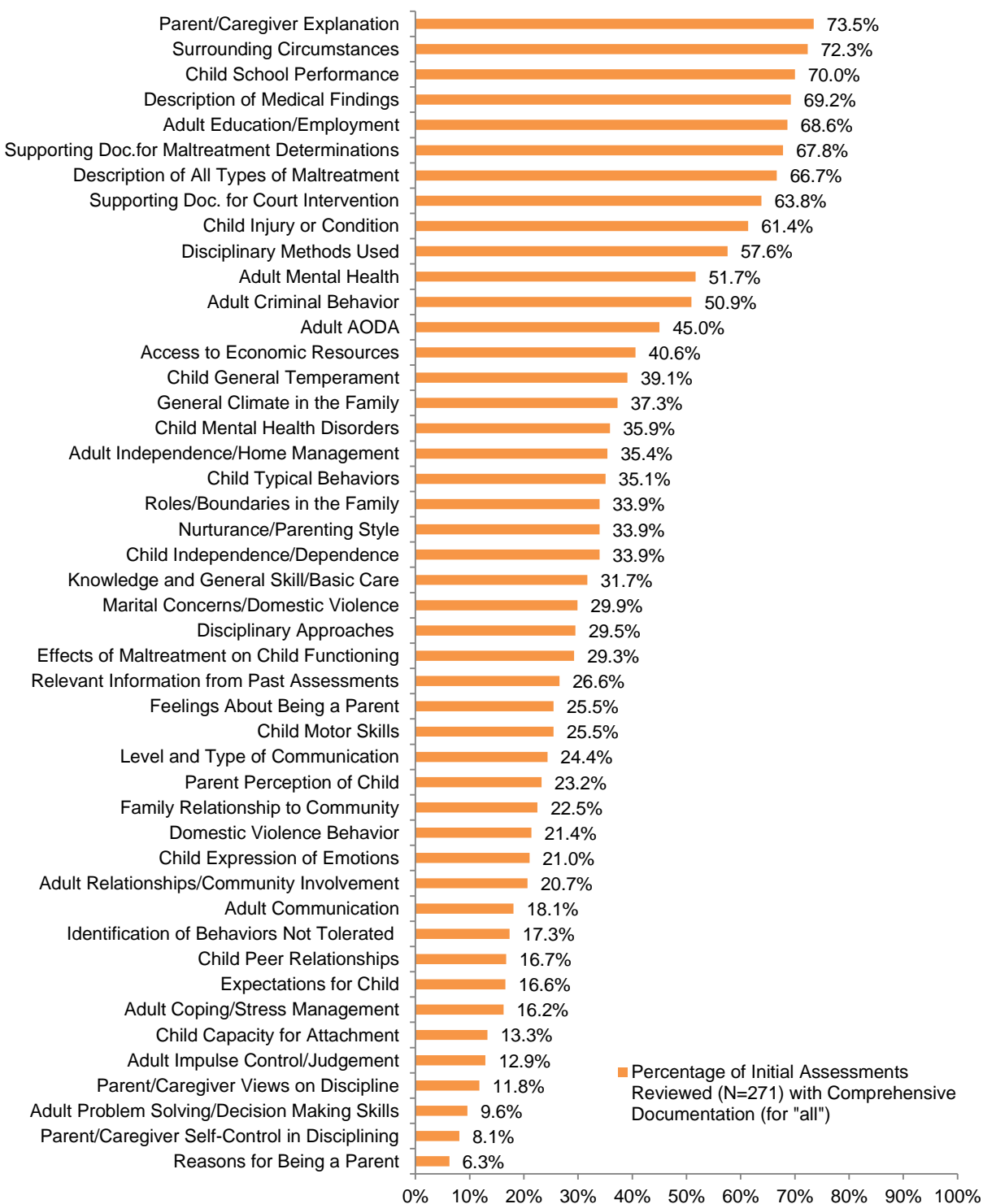


Table F-4. Adequacy of Protective Plans.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.

	Yes		No	
	N [∞]	%	N [∞]	%
Protective Plan Immediately Implemented	49	89.1%	6	10.9%
Protective Plan Controls for All Identified Present Danger Threats for All Children	42	80.8%	10	19.2%

[∞] Note: Not equivalent in all categories

Table F-5. Adequacy of In-Home Safety Plans.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.

	Yes		No	
	N	%	N	%
Describes All Identified Impending Danger Threats	5	55.6%	4	44.4%
Describes Safety Services Used to Manage Impending Danger Threats	4	44.4%	5	55.6%
Includes Names of Safety Services Providers	3	33.3%	6	66.7%
Describes Roles and Responsibilities of Providers	3	33.3%	6	66.7%
Describes Frequency and Duration of Necessary Services/Action	3	33.3%	6	66.7%
Confirms Services/Action Are Available at Level/Time Required	3	33.3%	6	66.7%
Describes How CPS Will Manage/Oversee Safety Plan	3	33.3%	6	66.7%

**Table F-6. Adherence to Standards in Inclusion of Required Individuals in Initial Assessment.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.**

<i>Are All Required Individuals Included in the Initial Assessment?</i>		N	%
Alleged Victims	Yes	258	95.2%
	No	13	4.8%
Other Children in the Household	Yes	242	89.3%
	No	29	10.7%
Parents/Caregivers	Yes	230	84.9%
	No	41	15.1%

**Table F-7. Household Composition of IAs in the Random Sample.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.**

		N	%
Alleged Victims:	Multiple	114	42.1%
	One	157	57.9%
Caregivers:	Single Parent	100	36.9%
	Two-Parent	171	63.1%
Children:	Only Child	67	24.7%
	Multiple Siblings	204	75.3%

Appendix G: All Review Results by Question

Unless otherwise noted, all numbers below indicate the number of Initial Assessments for which reviewers selected each answer (N=271). Note that in some subsections N=263, as the 8 Alternative Response cases are omitted where questions were not applicable, e.g., maltreatment determinations. Also note that not all questions grouped together share the same possible answers; in the case where an option was not available to be selected, there are two bars (“--”) in lieu of numbers.

REVIEW INSTRUMENT FACE SHEET

Table G-1. Overview. CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.

	Yes	No
Were all required children included within the IA?	242	29
Were all required alleged victims included within the IA?	258	13
Were all required parents/caregivers included within the IA?	230	41
If the case had a disposition of <i>unable to locate source</i> [∞] , were diligent efforts made to contact the parents/caregivers?	3	1
Did the agency assess the correct household where safety threats presented?	265	6 [‡]

[∞] Total N=4

[‡] Of the 6 IAs that did not assess the correct household, 5 missed an additional required household that should have been assessed separately, and 1 assessed the wrong household.

PRESENT DANGER ASSESSMENT

**Table G-2. Present Danger at Initial Face-to-Face Contact.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.**

Did the worker identify present danger at initial face-to-face contact for the alleged victim(s)?			
Yes	45	No	226
Does the reviewer agree that there was present danger at initial face-to-face contact?		Does the reviewer agree that there was no present danger at initial face-to-face contact?	
Yes	42	Yes	179
No	2	No	21
Not enough information	1	Not enough information	26

Table G-3. Identification of Present Danger Threats at Initial Contact. CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.

Does the reviewer agree with the present danger threats identified at initial face-to-face contact for the alleged victim(s)?			
Yes	29	No ⁴	16
		One or more <i>additional</i> present danger threats should have been identified.	3
		One or more present danger threats were <i>misidentified</i> .	0
		One or more present danger threats were <i>inaccurately</i> identified.	2
		Not enough key information documented in IA to assess accuracy of one or more identified present danger threats	11

Table G-4. Present Danger During IA Completion. CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.

Did the worker identify additional present danger during the Initial Assessment process?			
Yes	14	No	257
Does the reviewer agree that there was present danger?		Does the reviewer agree that there was <i>no</i> additional present danger?	
Yes	12	Yes	222
No	0	No	2
Not enough information	2	Not enough information	33

Table G-5. Identification of Additional Present Danger Threats Throughout IA. CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.

Does the reviewer agree with the additional present danger threats identified for all other children in the household?			
Yes	5	No	9
		One or more <i>additional</i> present danger threats should have been identified.	1
		One or more present danger threats were <i>misidentified</i> .	0
		One or more present danger threats were <i>inaccurately</i> identified.	0
		Not enough key information documented in IA to assess accuracy of one or more identified present danger threats	8

⁴ A "misidentified" Present Danger Threat is when the child welfare agency indicated a specific Present Danger Threat to child safety, but a different Present Danger Threat was more appropriate based on the observable condition described. A Present Danger Threat is "inaccurately identified" when the information does not support the Present Danger Threat as observable, immediate (occurring or "in process" of occurring), significant, and likely to result in severe harm to a child. It is important to note that this section did not measure or track individual, specific present danger threats. For example, if the agency identified the Present Danger Threat of *child needs medical attention*, the questions did not assess whether this specific threat was identified consistently with Standards.

**Table G-6. Creation and Implementation of Protective Plans When Present Danger Threats Exist.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.**

Was a Protective Plan created [documented]?			
Yes	55	No	216
Protective Plan document	15	Protective Plan was needed and not documented	24
Temporary Physical Custody Order	33	Protective Plan was not needed	170
Voluntary Placement Agreement	2	Not enough key information documented to assess whether or not a Protective Plan was needed	22
Other court order/multiple types	5		
Was the Protective Plan immediately implemented?			
Yes	49	No	6

**Table G-7. Protective Plan Sufficiency of Controlling for Present Danger Threats.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.**

Was protective planning sufficient to control for all present danger throughout the IA?			
Yes	42	No	10
		Protective Plan was sufficient to control for <i>some</i> present danger threats	2
		Protective Plan was sufficient to control for present danger threats for <i>some</i> children	2
		Protective Plan was sufficient to control for <i>none</i> of the present danger threats	6

**Table G-8. Adequate Documentation of Protective Plan Participant's Reliability, Commitment, and Availability.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.**

Does the Protective Plan document that the reliability, commitment, and availability of each participant/provider[‡] to control for safety was confirmed prior to implementation?			
	Yes, for <i>all</i> plan participants/providers	<i>Some</i> participants/providers	<i>None</i> of the participants/providers
Reliability	7	2	6
Commitment	7	2	6
Availability	8	2	5

[‡] In 5 cases, reviewers indicated that the associated Protective Plan relied on multiple participants/providers.

**Table G-9. Adequate Documentation of Required Information in Protective Plan Documents.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.**

Did the Protective Plan contain the following required information to control for present danger threats (PDTs) for <i>all</i> children in the household?			
	Yes, for <i>all</i> required individuals/items	<i>Some</i> required individuals/items	<i>None</i> of the required individuals/items
Identification of present danger threat(s)	12	1	2
How the plan is intended to control identified threat(s) to each child	9	1	5
Specific actions/services to control PDTs (with frequency and duration)	10	0	5
Name(s) of the responsible/ protective adult related to each protective action and an explanation of his/her relationship to the family	12	1	2
Alleged maltreater access to the child(ren)	11	1	3
How CPS will oversee/ manage the Protective Plan, including communication with the family and providers	8	--	7

**Table G-10. Completion of Required Protective Plan Actions.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.**

Were the required communications, actions, and supervisory consultation completed?		
	Yes	No
Explanation to parents/caregivers of the reason(s) present danger exists	11	4
Consult with a supervisor or her/his designee by the next working day	7	8

**Table G-11. Confirming Safety in Unlicensed Homes Used in Protective Plans.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.**

If a Protective Plan was implemented in which children were temporarily outside the home[‡] as part of a negotiated arrangement, was safety in the unlicensed home(s) confirmed?			
	Yes, for <i>all</i> required homes/individuals	<i>Some</i> required homes/individuals	<i>None</i> of the required homes/individuals
Assessment of safety in the unlicensed home(s) through direct contact prior to implementation of the Protective Plan	4	1	2
Discussion of expectations and provider's role <i>prior</i> to the child(ren) entering home	4	1	2
Home visit conducted within 24 hours	5	1	1
Check of law enforcement records on <i>all</i> required individuals residing in the home requested within 24 hours	4	1	2
CPS records check conducted within 24 hours for <i>all</i> required individuals	3	1	3

[‡] In 8 cases, reviewers indicated that there was a child placed temporarily outside of the home; 3 of the cases involved multiple children and in 1 of those cases the children went to different homes.

**Table G-12. Confirming Safe Environments for Court Ordered Placements.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.**

If a child was placed in an unlicensed or licensed home as part of a Temporary Physical Custody Order (TPC), Voluntary Placement Agreement (VPA), or other court order, were the requirements of Confirming Safe Environments (CSE) met for all applicable children?	
Yes, for <i>all</i> applicable children	28
<i>Some</i> applicable children	2
<i>None</i> of the applicable children	9

INFORMATION GATHERING and ANALYSIS

Table G-13. Information Gathering and Documentation: Maltreatment.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.

Does the assessment narrative contain a comprehensive description of the extent of the maltreatment and the supporting documentation for maltreatment determinations to accurately assess safety (and supporting documentation for court intervention, if applicable)?					
	Yes, for <i>all</i> maltreatment types	<i>Some</i> maltreatment types	<i>None</i> of the maltreatment types		
Detailed description of all types of maltreatment	176	30	58		
Supporting documentation for maltreatment determinations	179	23	62		
	Yes, <i>all</i> injuries/conditions for <i>all</i> children	<i>Some</i> injuries/conditions	<i>Some</i> children	<i>None</i> of the injuries/conditions and <i>none</i> of the children	
Specific information about injury or condition(s) for all applicable children	162	16	11	75	
	Yes, <i>all</i> findings for <i>all</i> children	<i>Some</i> findings	<i>Some</i> children	<i>None</i> of the findings and <i>none</i> of the children	Not applicable
Description of medical findings for all applicable	36	1 [∞]	1 [∞]	15	212
	Yes	No	Not applicable		
Supporting documentation for court intervention	30	17	217		

[∞] Same case

Table G-14. Information Gathering and Documentation: Surrounding Circumstances.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.

Does the assessment narrative contain a comprehensive description of the surrounding circumstances to accurately assess safety?		
	Yes	No
Circumstances accompanying or leading up to the maltreatment	191	73
Parent/caregiver's explanation of maltreatment	194	70

**Table G-15. Information Gathering and Documentation: Child Functioning
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.**

Does the assessment narrative contain a comprehensive description of functioning for all children in the household to accurately assess safety?				
	Yes, for <i>all</i> children	<i>Some</i> children	<i>None</i> of the children	Not applicable
Capacity for attachment	36	46	189	--
General temperament	106	69	96	--
Expressions of emotions/feelings	57	72	142	--
Typical behaviors	95	69	107	--
Presence and level of peer relationships	38	53	136	44
School performance and behaviors	161	43	26	41
Known mental health disorders	80	53	90	48
Independence/dependence	92	63	116	--
Motor skills and physical capacity	69	74	128	--
Effects of maltreatment on the child(ren)'s functioning	55	25	108	83

**Table G-16. Information Gathering and Documentation: Adult Functioning
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.**

Does the assessment narrative contain a comprehensive description of functioning for all adults living in the household to accurately assess safety?			
	Yes, for <i>all</i> adults	<i>Some</i> adults	<i>None</i> of the adults
Communication	49	31	191
Coping/stress management	44	29	198
Impulse control/ judgment	35	16	220
Problem solving/ decision making skills	26	15	230
AODA	122	39	110
Mental health	140	48	83
Independence, money/ home management	96	41	134
Employment/education	186	56	29
Social relationships, citizenship/ community involvement, and other basic life skills	56	36	179
General criminal behavior	138	38	95
Domestic violence behavior	58	25	188
Relevant information from past assessments/ childhood	72	36	163

Table G-17. Information Gathering and Documentation: Discipline.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.

Does the assessment narrative contain a comprehensive description of the disciplinary practices used with all of the children in the household to accurately assess safety?					
	Yes, for <i>all</i> parents/ caregivers and <i>all</i> children	<i>Some</i> parents/ caregivers	<i>Some</i> children	<i>Some</i> parents/ caregivers and <i>some</i> children	<i>None</i> of the parents/caregivers and <i>none</i> of the children
Disciplinary methods used	156	38	22	8	47
Identification of behaviors that are and are not tolerated	47	20	16	6	183
Information on the use of a variety of disciplinary approaches suited to the child(ren)'s age and needs	80	30	18	7	136
Identification of the extent to which the parent/caregiver(s) demonstrate self-control when disciplining	22	18	5	5	221
Identification of the parent/ caregiver views on discipline	32	12	5	4	218

Table G-18. Information Gathering and Documentation: Parenting Practices.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.

Does the assessment narrative contain a comprehensive description of the parenting practices to accurately assess safety?					
	Yes, for <i>all</i> parents/ caregivers and <i>all</i> children	<i>Some</i> parents/ caregivers	<i>Some</i> children	<i>Some</i> parents/ caregivers and <i>some</i> children	<i>None</i> of the parents/caregivers and <i>none</i> of the children
Parents' perception of child(ren)	63	26	10	6	166
Reasons for being a parent	17	7	3	1	243
Feelings about being a parent	69	32	3	5	162
Knowledge and general skill/basic care	86	39	10	9	127
Nurturance/parenting style	92	48	7	9	115
Expectations for child(ren)	45	29	7	6	184

**Table G-19. Information Gathering and Documentation: Family Functioning.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.**

Does the assessment narrative contain a comprehensive description of family functioning?		
	Yes	No
Clarity around roles and boundaries in the family	92	179
Level and type of communication	66	205
Marital concerns/presence or absence of domestic violence	81	190
General climate within the family	101	170
Relationship to the community	61	210
Ability to meet the family's needs (access economic resources)	110	161

**Table G-20. Information Gathering and Documentation: Child and Family's Response to Maltreatment (Alternative Response Only).
Family Functioning. CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.**

Does the assessment narrative contain a comprehensive description of the presenting CPS Issues and Family Strengths and Needs to accurately assess safety?		
	Yes	No
Description of presenting issue(s) leading up to CPS involvement	5	3
Information about family strengths	2	6
Information about family needs	2	6

SAFETY ASSESSMENT and SAFETY ANALYSIS AND PLAN

**Table G-21. Impending Danger Assessment.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.**

Did the worker identify impending danger during Initial Assessment?			
Yes	44	No	227
Does the reviewer agree that there was impending danger?		Does the reviewer agree that there was no impending danger?	
Yes	39	Yes	164
No	2	No	5
Not enough information	3	Not enough information	58

**Table G-22. Identification of Impending Danger Threats.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.**

Does the reviewer agree with the impending danger threats documented in the Safety Assessment?			
Yes	24	No⁵	20
		One or more <i>additional</i> impending danger threats should have been identified for a different observable condition.	3
		One or more impending danger threats were <i>misidentified</i> .	3
		One or more impending danger threats were <i>inaccurately</i> identified	8
		Not enough key information documented in IA to assess accuracy of one or more identified impending danger threats	8
Does the agency description of the unsafe condition(s) support the identified impending danger threat(s)?			
Yes			23
Some			10
No			11
Multiple impending danger threats were incorrectly identified for the same family condition(s)			1

**Table G-23. Creation of Safety Analysis and Plan (SAP) When Impending Danger Threats Exist.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.**

Was a Safety Analysis and Plan (SAP) created?			
Yes	45	No	226
		SAP was needed and not developed	7
		SAP was not needed and not developed	171
		Not enough key information documented to assess whether or not a SAP was needed	48

⁵ A "misidentified" Impending Danger Threat is when the child welfare agency indicated a specific impending danger threat, but a different Impending Danger Threat was more appropriate based on the unsafe condition. An Impending Danger Threat that was "inaccurately identified" means information does not support the Impending Danger Threat based on the impending danger threshold (Observable, Vulnerable Child, Out-of-control, Imminent, Severity). It is important to note that this section did not measure or track individual, Specific Impending Danger Threats. For example, if the agency identified the Impending Danger Threat of *parent/caregiver lacks knowledge, skill, or motivation in parenting that affects child safety*, the questions did not assess whether this specific threat was identified consistently with Standards.

**Table G-24. Analysis to Determine Feasibility of In-Home Safety Plan.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.**

Which choice did the agency select in the Safety Analysis and Plan for the question: “Can and will the non-maltreating parent or another adult in the home protect the children?”								
N/A			10	No	27	Yes		8
Does the assessment support the worker’s analysis of the safety plan?						Does the documentation support the worker’s assessment of that person’s willingness, ability and capacity to provide protection?		
Yes			28			Yes		5
No			4			No		3
Not enough information			5					

**Table G-25. Adequate Documentation of Required Information for In-Home Safety Plans.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.**

Does the in-home safety plan sufficiently control the impending danger threats (IDTs) throughout the Initial Assessment?			
	Yes, for <i>all</i> required individuals/items	<i>Some</i> required individuals/items	<i>None</i> of the required individuals/items
Description of the specific IDTs	5	1	3
Safety services used to managed IDTs	4	4	1
Names of safety services providers	3	5	1
Roles and responsibilities of providers	3	0	6
Frequency and duration of services/action	3	1	5
Necessary services/ action/ providers exist and are available at level/time required	3	0	6
How CPS will manage/oversee the safety plan [‡]	3	--	6

[‡] The option to select *some* was not available.

**Table G-26. Case Transition and Family Interaction.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.**

	Yes	No	Not applicable
Was safety actively managed throughout the Initial Assessment process?	209	62	--
Was safety actively managed throughout case transition?	47	9	215
Did a timely case transition meeting occur?	31	21	219
Did the initial family interaction occur within five business days of out-of-home-care placement?[‡]	12	26	--

[‡] There was no option to select not applicable for this question; however, reviewers only answered when the IA under review had a placement outside the home (N=38)

TIMEFRAMES AND INTERVIEW PROTOCOL

**Table G-27. Face-to-Face Contacts, Interviews, and Home Visit.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.**

	Yes, for <i>all</i> alleged victims	<i>Some</i> alleged victims	<i>None</i> of the alleged victims
Did the Initial Assessment worker make face-to-face contact with the alleged victim(s) within the assigned response time?	178	33	60
Did the Initial Assessment worker make face-to-face contact with the parent(s)/caregiver(s) within the assigned response time?	129	142	
Did a home visit take place where the alleged maltreatment occurred or where threats to child(ren)'s safety existed?	237	34	
	Yes, for <i>all</i> required household members	<i>Some</i> required household members	<i>None</i> of the required household members
Did a face-to-face interview/observation occur with all required household members?	178	85	8

Table G-28. Contact with Non-Custodial Parents.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.

Did an interview occur with the non-custodial parent(s) OR is there documentation to support why the interview did not occur?	
Yes, for <i>all</i> required non-custodial parents	64
<i>Some</i> required non-custodial parents	10
<i>None</i> of the required non-custodial parents	80
Interview(s) did not occur, but there is documentation to support reasons why	47
There is documentation to support reasons why <i>some</i> interview(s) did not occur	7
Not applicable	63

Table G-29. Collateral Contacts Necessary for Understanding Child Safety in the Initial Assessment Under Review.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.

Were necessary collateral contacts made?			
Yes	29	No [‡]	16
		Missing:	
		Teacher/School Social Worker/Other Educational Staff	27
		Family Member(s)	24
		Therapist/Other Mental Health Professional	22
		Doctor/Other Medical Professional	18
		Other	17
		Police/Probation Office/Other Law Enforcement	15
		Friend(s)	5
		Neighbor(s)	2

[‡] When it was determined that one or more collateral contacts necessary to address potential threats to safety in the IA under review were missed, reviewers were asked to categorize them into the following key groups.

AMERICAN INDIAN HERITAGE

Table G-30. Screening for Child's Status as Indian.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.

Has the "Screening for the Child's Status as Indian" form (DCF-F-CFS2322) been completed in e-WiSACWIS for each child?	
Yes, for <i>all</i> children	185
<i>Some</i> children	27
<i>None</i> of the children	59

**Table G-31. Children with American Indian Heritage.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.**

For how many children was American Indian Heritage indicated? [‡]

Number of Children with AIH Per Case	Number of Cases (IAs)
0	191
1	6
2	4
3	7
4	4

[‡] For each IA, reviewers were asked to indicate for how many children the screening for Indian status was positive. In 191 cases there were no children with a positive screening (including those that did not complete the required screening); in 6 IAs there was 1 child (for a subtotal of 6 children); in 4 IAs there were 2 children (for a subtotal of 8); in 7 IAs there were 3 children (for a subtotal of 21); the most children with a positive screening in a single case was 4, which occurred in 4 IAs (subtotal of 16 children), for a grand total of 51 children in 21 IAs for whom screening for Indian status was positive.

**Table G-32. Required Forms and Tribal Consultation.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.**

	Yes, for <i>all</i> applicable children	<i>Some</i> applicable children	<i>None</i> of the applicable children
Has the “Child’s Biological Family History” form (DCF-F-CFS2323) been completed in e-WiSACWIS for each American Indian child?	18	1	2
Has the “Request for Confirmation of Child’s Indian Status” form been completed for each child with American Indian heritage	12	2	7
	Yes	No	
Did a consultation with the tribal agency occur?[‡]	4	19	

[‡] In addition to the 21 cases where American Indian heritage was indicated for the child(ren), there were 2 additional cases where reviewers determined that a consult with the tribal agency was necessary.

IA CONCLUSION

**Table G-33. Safety Determination.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.**

What was the safety determination at the conclusion of the Initial Assessment?			
Safe	229	Unsafe	42
Does the reviewer agree with this safety determination?		Does the reviewer agree with this safety determination?	
Yes	171	Yes	37
No	4	No	1
Not enough information	54	Not enough information	4

Table G-34. Maltreater and Maltreatment Determinations.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.

Were all alleged victims accurately identified?			
Yes	238	No	25
		Other child(ren) in household should have also been alleged victim(s)	20
		Not enough information contained in IA to assess the accuracy of alleged victim(s)	5
Were all alleged victims accurately identified?			
Yes	239	No	24
		Other maltreater(s) in household should have also been identified.	4
		An unknown maltreater should have been named.	0
		A named maltreater should have been unknown.	3
		There should have been an additional named maltreater.	11
		There should have been a different named maltreater/relationship to victim was incorrect.	0
		Not enough information contained in IA to assess the accuracy of alleged maltreater(s)	8
Were all allegations correct for all children?			
Yes	227	No	36
		Allegation(s) should have been of a different type	0
		Missed allegation(s):	27
		<i>Children were missed</i>	21
		<i>There should have been additional allegations</i>	11
		Not enough information contained in IA to assess the accuracy of alleged maltreater(s)	9
Does the reviewer agree with the substantiation/unsubstantiation results?			
Yes	211	No	52
		There were unsubstantiated allegations that should have been substantiated	7
		There were substantiated allegations that should have been unsubstantiated	2
		Not enough information contained in IA to assess the accuracy of the subs/unsubs results	43

Table G-35. Case Disposition.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.

Does the reviewer agree with the case disposition at which the agency arrived?	
Yes	217
No	6
Not enough information contained in the IA to determine	48

Table G-36. Notifications and Referrals.
CQI 2015 Initial Assessment Case Record Review, DCF, Wisconsin 2015.

	Yes, for <i>all</i> relevant individuals	<i>Some</i> relevant individuals	<i>None</i> of the relevant individuals	Not applicable (no substantiated findings)
Did the agency notify person(s) against whom a substantiated finding of child maltreatment was made of the right to appeal the decision?	32	0	15	216
		Yes	No	Not applicable [‡]
Was feedback provided to the mandated reporter within 60 days of the report?		121	79	--
Was feedback provided to the relative reporter within 20 days of receipt of the request?		4	0	31
Does the Initial Assessment indicate a referral to the Birth-to-3 Program was made for all children under three years of age who were substantiated as having been maltreated?		9	12	250

[‡] Reviewers only answered the questions when there was a mandated and/or relative reporter involved in in the Access Report(s) tied to the Initial Assessment under review. In the case of relative reporter, "Not applicable" refers to instances when there is no indication that the relative reporter requested feedback. With respect to referrals to Birth-to-3, "Not applicable" refers to Alternative Response cases and/or cases in which there were no children substantiated who were less than three years of age.

Appendix H: Quality Management

The Initial Assessment case record review quality management (QM) plan developed to ensure valid and reliable case record review data. The QM plan consisted of two components. The first component, quality assurance (QA), established review policies and procedures to verify that data quality objectives were met. Most of this work occurred before the case review process started. The second component, quality control (QC), established a process of ensuring data integrity through consistent monitoring of accuracy and completeness. This work typically occurred after a case record review was completed.

Quality Assurance

Review Instrument Development: Prior to commencing the 2015 Initial Assessment case record review, the Initial Assessment case record review instrument was rigorously tested for validity and reliability. Multiple inter-rater reliability studies were conducted during 2014 and early 2015. Over the course of these studies, improvements and clarifications were made to questions in the Initial Assessment review instrument and instructions.

Reviewer Training and Expertise: All certified case reviewers were required to have child welfare experience. They also completed additional training prior to conducting reviews. Training included Initial Assessment Pre-Service Training and an eight-hour training on the Initial Assessment review instrument. Trained reviewers were provided coaching and mentoring throughout the review process. Additionally, an expert peer reviewer (a Quality Assurance Program Specialist who did not review the Initial Assessment originally) conducted a second case record review for each reviewer in training.

Review Sample: An internal procedure was established for swapping out an Initial Assessment from the sample and replacing it with a different Initial Assessment from the oversample when needed. Reasons necessitating case swaps included:

- Cases with case disposition of *Unable to Locate* where the reviewer identified that diligent efforts were made to locate the family,
- IAs that met exceptions defined by Chapter 22 of Initial Assessment Standards,
- IAs that assessed the incorrect household,
- IAs that were completed as part of BMCW's case closure project.⁶

Check-in Meetings: Reviewers met on a regular basis to discuss problem areas and difficult questions encountered during the Initial Assessment review, and procedures and areas where additional training and support were necessary. During 2015, clarifications and revisions were addressed in a series of weekly check-in meetings regarding the QM protocols, training, instructions, and the review instrument. Any changes and updates were shared in subsequent check-in meetings with final decisions communicated to each reviewer via e-mail and through the CQI SharePoint site. Updates to the instrument and instructions were made as needed.

Data Integrity: In collaboration with the University of Wisconsin-Madison School of Social Work, the Initial Assessment review instrument was modified to reflect only one construct per question. The final data was entered into Microsoft Excel, which relied on data validation mechanisms to ensure all required questions were answered.

⁶ The Division of Milwaukee of Child Protective Services, formerly the Bureau of Milwaukee Child Welfare (BMCW) followed an alternate staffing and documentation process to close Initial Assessments that were overdue in 2014. Because of the nature of information gathered and other amended protocols, there would be a lack of corresponding content to review using the current IA review instrument.

Quality Control

Checking for Data Errors: Because the Initial Assessment reviews were conducted on paper and then transferred to Microsoft Excel, and a robust quality control procedure was needed. Prior to input in Excel, all completed IA reviews were verified to ensure that all required questions were answered. If information was missing, the IA was returned to the reviewer to complete. Specific case information was also cross-checked to ensure accuracy:

- Date in which the review was conducted
- eWiSACWIS case number
- Assessment ID
- County Reviewed

Cases were also flagged when the reviewer indicated that the agency's decision was inconsistent with Standards in the following areas:

- Present danger
- Impending danger
- Safety determination
- Substantiation/unsubstantiation
- Disposition

The completed reviews were provided to two data entry specialists who entered the information into a Microsoft Excel spreadsheet that contained data validation mechanisms to ensure all required questions were answered. Through this process, if additional questions were identified as missing information, the review was returned to the initial reviewer for completion. All cases were checked twice to ensure accuracy of data entry. Additionally, random quality control checks were conducted on an additional 10 percent of cases.

Double-blind Reviews: A double-blind review of a sub-sample of Initial Assessments was conducted to assess the reliability of the questions in the IA review instrument. Prior to the beginning of the review, 10 percent of cases in the sample were randomly selected for double review and assigned to two reviewers who had no knowledge that another reviewer was to review the same case.

QA Reviews: This process involved reviewing all information from the original review to confirm accuracy (i.e., re-reviewing the entire IA); 20 IAs in the sample underwent an additional review.

Review Panel: Cases where the reviewer found the agency's decision to be inconsistent with Standards in any one of five areas noted above were flagged. In order to confirm these findings, a panel of expert peer reviewers from BPM and BSWB reassessed the 12 cases in which this occurred.

ICWA Reviews: All cases where reviewers indicated there was documentation of American Indian heritage (AIH) in the family were double checked to confirm AIH and all results related to the federal Indian Child Welfare Act (ICWA) and Wisconsin Indian Child Welfare Act.

Data Integrity: A process was established to ensure that the review data and administrative data were appropriately stored and secured. For example, the final Excel database was password-protected and only three data analysts had access.

Review Sample: The administrative data on cases in the sample were cross-referenced with all 2014 administrative data to determine if the sample estimates were appropriate compared to the population.

The sample was also prepared prior to making case assignments to reviewers in order to remove any cases pertaining to the BMCW case closure project.